

# Genetic loci associated with delayed clearance of *Plasmodium falciparum* following artemisinin treatment in Southeast Asia

Shannon Takala-Harrison<sup>a</sup>, Taane G. Clark<sup>b,1</sup>, Christopher G. Jacob<sup>a,1</sup>, Michael P. Cummings<sup>c,2</sup>, Olivo Miotto<sup>d,e,2</sup>, Arjen M. Dondorp<sup>e</sup>, Mark M. Fukuda<sup>f</sup>, Francois Nosten<sup>e,g</sup>, Harald Noedl<sup>h</sup>, Mallika Imwong<sup>i</sup>, Delia Bethell<sup>f</sup>, Youry Se<sup>j</sup>, Chanthap Lon<sup>j</sup>, Stuart D. Tyner<sup>f</sup>, David L. Saunders<sup>f</sup>, Duong Socheat<sup>k</sup>, Frederic Arley<sup>l</sup>, Aung Pyae Phy<sup>e,g</sup>, Peter Starzengruber<sup>h</sup>, Hans-Peter Fuehrer<sup>h</sup>, Paul Swoboda<sup>h</sup>, Kasia Stepniewska<sup>m</sup>, Jennifer Flegg<sup>m</sup>, Cesar Arze<sup>n</sup>, Gustavo C. Cerqueira<sup>n</sup>, Joana C. Silva<sup>n</sup>, Stacy M. Ricklefs<sup>o</sup>, Stephen F. Porcella<sup>o</sup>, Robert M. Stephens<sup>p</sup>, Matthew Adams<sup>a</sup>, Leo J. Kenefic<sup>a</sup>, Susana Campino<sup>d,q</sup>, Sarah Auburn<sup>q</sup>, Bronwyn MacInnis<sup>d,q</sup>, Dominic P. Kwiatkowski<sup>d,q</sup>, Xin-zhuan Su<sup>r</sup>, Nicholas J. White<sup>e</sup>, Pascal Ringwald<sup>s</sup>, and Christopher V. Plowe<sup>a,3</sup>

<sup>a</sup>Howard Hughes Medical Institute/Center for Vaccine Development, University of Maryland School of Medicine, Baltimore, MD 21201; <sup>b</sup>Department of Pathogen Molecular Biology, London School of Tropical Medicine, London WC1E 7HT, United Kingdom; <sup>c</sup>Center for Bioinformatics and Computational Biology, University of Maryland, College Park, MD 20742; <sup>d</sup>Medical Research Council Centre for Genomics and Global Health, University of Oxford, Oxford OX3 7BN, United Kingdom; <sup>e</sup>Mahidol-Oxford Research Unit, Faculty of Tropical Medicine, Mahidol University, Bangkok, 10400 Thailand; <sup>f</sup>Armed Forces Research Institute of Medical Sciences, Bangkok, 10400 Thailand; <sup>g</sup>Shoklo Malaria Research Unit, Mae Sod, Tak 63110, Thailand; <sup>h</sup>Institute of Specific Prophylaxis and Tropical Medicine, Medical University of Vienna, A-1090 Vienna, Austria; <sup>i</sup>Department of Molecular Tropical Medicine and Genetics, Faculty of Tropical Medicine, Mahidol University, Bangkok 10400, Thailand; <sup>j</sup>Armed Forces Research Institute of Medical Sciences, Phnom Penh 12252, Cambodia; <sup>k</sup>University of Health Science, Phnom Penh 12201, Cambodia; <sup>l</sup>Institut Pasteur Unité d'Immunologie Moléculaire des Parasites, F-75015 Paris, France; <sup>m</sup>WorldWide Antimalarial Resistance Network, Oxford University, Oxford OX3 7LJ, United Kingdom; <sup>n</sup>Institute for Genome Sciences, University of Maryland School of Medicine, Baltimore, MD 21201; <sup>o</sup>Research Technologies Branch, Rocky Mountain Laboratories, National Institute of Allergy and Infectious Diseases, National Institutes of Health, Hamilton, MT 59840; <sup>p</sup>Advanced Biomedical Computing Center, Frederick, MD 21702; <sup>q</sup>Malaria Programme, Wellcome Trust Sanger Institute, Hinxton CB10 1SA, United Kingdom; <sup>r</sup>Laboratory of Malaria and Vector Research, National Institute of Allergy and Infectious Diseases, National Institutes of Health, Bethesda, MD 20892; and <sup>s</sup>Drug Resistance and Containment Unit, Global Malaria Programme, World Health Organization, 1211 Geneva 27, Switzerland

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The recent emergence of artemisinin-resistant *Plasmodium falciparum* malaria in western Cambodia could threaten prospects for malaria elimination. Identification of the genetic basis of resistance would provide tools for molecular surveillance, aiding efforts to contain resistance. Clinical trials of artesunate efficacy were conducted in Bangladesh, in northwestern Thailand near the Myanmar border, and at two sites in western Cambodia. Parasites collected from trial participants were genotyped at 8,079 single nucleotide polymorphisms (SNPs) using a *P. falciparum*-specific SNP array. Parasite genotypes were examined for signatures of recent positive selection and association with parasite clearance phenotypes to identify regions of the genome associated with artemisinin resistance. Four SNPs on chromosomes 10 (one), 13 (two), and 14 (one) were significantly associated with delayed parasite clearance. The two SNPs on chromosome 13 are in a region of the genome that appears to be under strong recent positive selection in Cambodia. The SNPs on chromosomes 10 and 13 lie in or near genes involved in postreplication repair, a DNA damage-tolerance pathway. Replication and validation studies are needed to refine the location of loci responsible for artemisinin resistance and to understand the mechanism behind it; however, two SNPs on chromosomes 10 and 13 may be useful markers of delayed parasite clearance in surveillance for artemisinin resistance in Southeast Asia.

drug resistance | genome-wide association | molecular markers

Artemisinin-based combination therapies (ACTs) are the leading treatment for *Plasmodium falciparum* malaria (1), and their use with other tools to reduce the global malaria burden has sparked renewed consideration of malaria eradication. Malaria has been treated with artemisinin derivatives in Asia since the 1970s (2). Extremely fast-acting, artemisinins kill both young ring forms and mature blood-stage parasites (3). The World Health Organization (WHO) recommended in 2001 that artemisinins be used strictly in combination therapies in hopes of delaying the emergence of resistance (2), but ACT treatment failure rates were rising on the Thailand/Cambodia border by 2006 (4, 5) and progressively prolonged parasite clearance after treatment with

artemisinin derivatives soon followed (6–8). This evidence that artemisinin resistance has emerged in western Cambodia, historically an epicenter of drug-resistant malaria, is an ominous development that threatens the recent major global investment in ACTs (3). If genetically heritable artemisinin resistance has emerged, it can be expected to follow historical patterns of antimalarial resistance (9) and disseminate globally, at immense cost to human life. Strategies for containing resistance require accurate, up-to-date information about its geographical distribution. Molecular markers of resistance would provide a practical surveillance tool.

In 2008, the WHO initiated the Artemisinin Resistance Confirmation, Characterization, and Containment (ARC3) pilot project in Southeast Asia. Four clinical trials of artesunate monotherapy were done to define clinical and parasitological responses to the artemisinins without the confounding influence of partner drugs. Trials

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Data deposition: The SNP data reported in this paper have been deposited in PlasmoDB database, <http://plasmodb.org/plasmodb>.

<sup>1</sup>T.G.C. and C.G.J. contributed equally to this work.

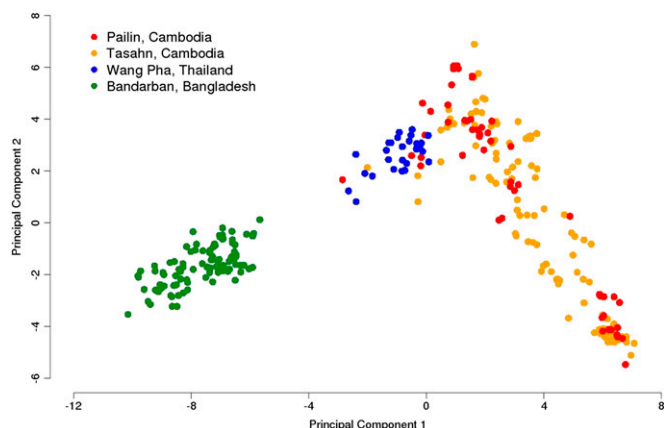
<sup>2</sup>M.P.C. and O.M. contributed equally to this work.

<sup>3</sup>To whom correspondence should be addressed. E-mail: [cplowe@medicine.umaryland.edu](mailto:cplowe@medicine.umaryland.edu).

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**Fig. 2.** Population structure by geography. A plot of the first two principal components from a principal components analysis demonstrates evidence of population structure among parasites based on geographic region.

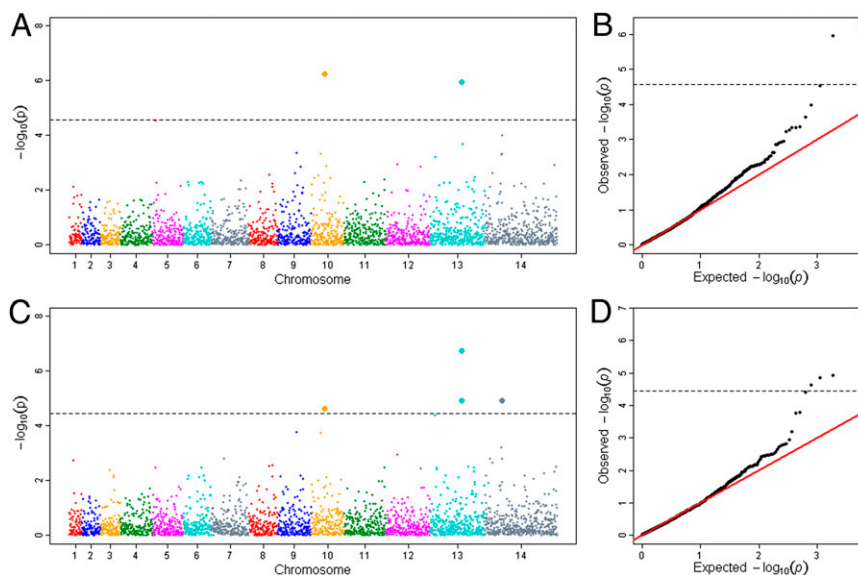
effect to account for lack of independence among genetically similar parasites. Study site was included as a fixed effect to account for any residual confounding due to population structure. Age and parasitemia at diagnosis were also included as covariates.

Two SNPs, one on chromosome 10 (MAL10-688956) and one on chromosome 13 (MAL13-1718319), achieved genome-wide significance in models of parasite clearance half-life (Fig. 3*A* and *B*). These SNPs and two additional ones, MAL13-1719976 and MAL14-718269, achieved genome-wide significance in models of parasite clearance time (Fig. 3*C* and *D*). Quantile–quantile plots indicated little residual confounding due to population structure or other potential confounding variables (e.g., host immunity; Fig. 3*B* and *D*). To further evaluate EMMA's ability to account for population structure, we repeated the same analyses excluding Bangladeshi parasites, which were clearly not resistant and genetically distinct from parasites from other sites. With Bangladeshi parasites excluded, most of the same top SNPs

were observed (*SI Text*), but with increased *P* values, likely due to a loss of power from the smaller sample size or possibly to reduced variability in the phenotype after excluding a large proportion of fast-clearing parasites.

A nonparametric method, Random Forests, was also used to assess the importance of each SNP and other covariates in predicting the clinical phenotypes based on the percent increase in mean-squared error. The best predictors of clearance half-life were study site, followed by SNP MAL13-1718319 [percent variance explained by all SNPs and other covariates (%Var) = 58.4%] (Fig. S7*A*). When Bangladeshi parasites were excluded, MAL13-1718319 was the best predictor of clearance half-life (Fig. S7*B*; %Var = 38.5%). The best predictors of clearance time were study site and log-transformed parasitemia at diagnosis (Fig. S7*C*; %Var = 64.2%). The two SNPs most predictive of clearance time in the Random Forests analysis (MAL14-2492091 and MAL9-1042451) were also the most predictive of parasites, being from Bangladesh (Fig. S7*E*), suggesting these SNPs were unrelated to artemisinin resistance, rather reflecting population structure. With Bangladeshi parasites excluded, parasitemia at diagnosis remained the best predictor of clearance time, followed by SNP MAL13-1718319 (Fig. S7*D*; %Var = 30.8%; Table 1).

**Markers of Delayed Parasite Clearance.** To test the utility of the SNPs in Table 1 as surveillance tools for tracking parasites with delayed parasite clearance, odds ratios (ORs) were estimated at each SNP comparing the log odds of an infection having clearance half-life >5 h (the median clearance half-life in our dataset) in parasites with a given allele to those with the alternative allele (Table 2). The proportion of infections with half-life >5 h was 77% in western Cambodia, 20% in Thailand, and 3.1% in Bangladesh. The frequency of the A and T alleles at SNPs MAL10-688956 and MAL13-1718319, respectively, closely mirrored the frequency of delayed clearance at each site (Table 2). The odds of delayed clearance were also significantly greater in infections with these alleles compared with those with the alternative allele in the full dataset [OR = 15.1 and OR = 22.8 for MAL10-688956 (A) and MAL13-1718319 (T), respectively] and in Cambodian parasites alone [OR = 6.1 and OR = 6.7 for MAL10-688956



**Fig. 3.** SNPs associated with parasite clearance in regression models. Manhattan plots showing  $-\log_{10} P$  values for each SNP tested in EMMA models of (A) parasite clearance half-life and (C) parasite clearance time for the dataset including all study samples. Corresponding quantile–quantile plots for models of (B) parasite clearance half-life and (D) clearance time are also shown. The red lines in *B* and *D* indicate the distribution of expected *P* values in the absence of any association or confounding. Early deviation from the expected line suggests the presence of confounding that has not been adequately controlled for in the analysis, whereas deviations at the highest  $-\log_{10} P$ -value ranges represent the loci most strongly associated with the phenotype. In all panels, the dashed horizontal lines indicate thresholds for genome-wide significance determined using a phenotype-permutation approach.





To identify genomic regions in which to seek candidate artemisinin resistance genes, we defined LD windows around SNPs associated with parasite clearance in Cambodia. These LD windows were wide (76–94 kb), containing large numbers of genes, consistent with extended haplotypes seen with recent selection. No significant SNPs showed  $r^2 > 0.5$  with any adjacent SNPs with MAF  $> 0.05$ . Whole-genome sequencing of 227 *P. falciparum* field isolates indicated that  $r^2$  fell below 0.10 within 1 kb in all parasite populations studied (18). The markers in our GWAS were, on average, 7 kb apart, so it may be that other loci associated with parasite clearance were not detected because they were not in LD with a genotyped SNP. This possibility and the relatively small sample size of this initial study (compared with typical human GWAS) highlight the need for larger replication studies with denser SNP coverage to map artemisinin resistance loci more finely.

Earlier GWAS using in vitro resistance phenotypes (16, 17, 19) found associations between SNPs in several genes and IC<sub>50</sub> of DHA and other artemisinin derivatives, but none were in our top-ranked signatures of selection or in LD windows corresponding to our GWAS hits. This discordance is likely explained by the use of different resistance phenotypes. Previous studies assessed an in vitro phenotype in culture-adapted parasites continuously exposed to drug, whereas we studied clinical phenotypes in patients with acute malaria treated with rapidly cleared daily artesunate. In our study, DHA IC<sub>50</sub> had low heritability, was significantly associated with no SNPs, and did not overlap with candidate SNPs associated with clinical parasite clearance phenotypes. These findings confirm that DHA IC<sub>50</sub> does not capture the delayed clearance phenotype that is the hallmark of artemisinin resistance in Cambodia (6–8) and emphasize the need to develop in vitro assays of artemisinin susceptibility that can be used for functional validation of candidate resistance genes.

Agreement was seen, however, between regions under recent positive selection in our study and those identified recently by others as being under strong recent selection in Cambodia (20). Cheeseman et al. (20) estimated  $F_{ST}$  and XP-EHH for 6,969 genome-wide SNPs and identified 33 genomic regions under recent selection in Cambodia compared with Thailand and Laos, 11 of which overlapped with top-ranked signatures of selection in our study. Of 90 SNPs genotyped by Cheeseman et al. (20) within the selected regions, two on chromosome 13 were associated with parasite clearance rates in northwestern Thailand. Fine-mapping of a 550-kb region surrounding these SNPs identified a 35-kb region ~45 kb downstream from MAL13-1718319 and MAL13-1719976, SNPs associated with delayed parasite clearance in our study. Although the LD window containing these SNPs does not overlap with the region identified by Cheeseman et al. (20), both regions are within the top-ranked signature of selection on chromosome 13 identified in our study. Because the chromosome 13 signature identified in the Cheeseman et al. study (20) began at position 1735000, and associations were examined in selected regions only, association with SNPs MAL13-1718319 and MAL13-1719976 could not have been identified in that study. In contrast, our study included five SNPs within the locus identified by Cheeseman et al. (20), none of which were associated with parasite clearance. Further investigation is needed to confirm the presence of a causal locus on chromosome 13 and refine its location.

Interestingly, three of the four SNPs associated with parasite clearance in our study lie in or near genes involved in the same metabolic pathway. MAL10-688956 is located in the 3' untranslated region of DNA polymerase delta (PF10\_0165), and MAL13-1718319 and MAL13-1719976 are located in or near a RAD5 homolog (MAL13P1.216). Both of these proteins are thought to be involved in postreplication repair (PRR) (21), a DNA-damage tolerance pathway. RAD5 is thought to polyubiquitinate proliferating cell nuclear antigen (a DNA clamp that assists in processivity of DNA polymerase delta) in conjunction with two ubiquitin-conjugating enzymes, prompting activation of error-free DNA repair via template switching (21). Also involved in this pathway are several deubiquitinating enzymes, including *ubp1*, which has been linked to artemisinin resistance in the

rodent malaria *Plasmodium chabaudi* (22). This pathway may be activated by DNA damage caused by oxidative stress from toxic by-products of hemoglobin degradation following artemisinin treatment (23). Mutations in this pathway could result in cell cycle arrest, as was observed in a PRR knockout model in yeast (24). Such down-regulation of the cell cycle is consistent with reduced DNA synthesis and other metabolic functions observed in the ring and trophozoite stages of parasites showing delayed clearance following artemisinin treatment (25).

The gene ontology for PF13\_0237, immediately upstream from the RAD5 homolog on chromosome 13, also suggests a possible function in DNA replication and cell cycle regulation. This functional assignment is based on a protein domain similar to Cdt1, a replication initiation factor essential for cell cycle progression (26). The role of these proteins and pathways in artemisinin resistance is plausible, but needs further evaluation.

Resistance-associated alleles at SNPs MAL13-1718319 and MAL10-688956 had frequencies closely mirroring the prevalence of parasites with delayed clearance at the study sites, supporting the notion that they could be useful markers for surveillance of artemisinin resistance. However, these SNPs are evidently not sufficient to cause resistance, because they are found in other *P. falciparum* strains [e.g., V1/S and IT (MAL13-1718319-T) and V1/S, IT, 106/I, and FCR3 (MAL10-688956-A)] of diverse geographic origins collected well before reports of artemisinin resistance in Asia. These SNPs may be in LD with causal loci that were not on the SNP array; their utility as surveillance tools requires validation in studies done in diverse geographic regions with a range of parasite clearance half-lives. Rapid molecular assays suitable for typing these two candidate markers using dried blood spots are available at [www.wvarn.org/toolkit/procedures/molecular](http://www.wvarn.org/toolkit/procedures/molecular).

SNPs called from whole-genome sequencing of parasites (18) collected from ARC3 and subsequent artesunate efficacy trials will provide data for larger replication studies with denser SNP coverage. The genomic and clinical data and cryopreserved parasites from these studies will also facilitate candidate gene association studies and functional validation of candidate genes.

## Materials and Methods

Please see *SI Text* for a more detailed description of the methods used in this study.

**ARC3 Clinical Trials.** Clinical trials of artesunate efficacy were conducted at two sites in western Cambodia (Pailin and Tسانh), and one site each in northwestern Thailand (Wang Pha) and Bangladesh (Bandarban) following protocols approved by the Research Ethics Review Committee of the World Health Organization, as well as local Institutional Review Boards at each study site. Details of each trial are shown in *Table S1*.

**Parasite Genotyping.** DNA was extracted from leukocyte-depleted blood and underwent whole-genome amplification (WGA) and genotyped at 8,079 SNPs using a molecular inversion probe Affymetrix *P. falciparum* SNP array. The assay was performed following the Affymetrix GeneChip Scanner 3000 User Guide without modification, except for alterations made to the first PCR thermal cycling parameters (16).

**Phenotypes. Parasite clearance time and rate.** Parasite clearance half-lives were estimated using a parasite clearance estimator developed by the WorldWide Antimalarial Resistance Network (10). The estimator calculates parasite clearance rate based on the linear portion of the log<sub>e</sub> parasitemia-time curve, and half-life is estimated as  $\log_e(2)/\text{clearance rate}$ . Please see *SI Text* for details of susceptibility testing.

**Data Analysis. Genotype calling and quality control.** Raw allele intensity data from the SNP array were normalized using the Affymetrix GeneChip Targeted Genotyping Analysis Software (GTGS). To assess robustness of SNP calls, genotypes were called using three algorithms: (i) GTGS, (ii) illumisus (27), and (iii) a heuristic algorithm based on discrete cutoffs of intensity strength and contrast, with cutoffs established by analysis of empirical distributions. SNP calls from the three algorithms were  $>90\%$  concordant, and calls from the heuristic algorithm were used in the analysis. Genotype data has been submitted to PlasmoDB for public access (<http://plasmodb.org/plasmo/>). SNPs

